

FORMS FOR BID

FOR CONSTRUCTION ON STATE HIGHWAY IN ALAMEDA COUNTY NEAR LIVERMORE FROM ROUTE 680/84 SEPARATION TO 0.1 MILE SOUTH OF RUBY HILL DRIVE

In District 04 On Route 84

Under

Notice to Bidders and Special Provisions dated April 4, 2016

Standard Specifications dated 2010

Project plans approved February 22, 2016

Standard Plans dated 2010

Applicable to

Electronic *Bid* book dated April 4, 2016 Identified by Contract No. 04-1J2504 04-Ala-84-R18.0/R22.9 Project ID 0414000159

Federal-Aid Project ACNHP-P084(045)E

STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

DBE - COMMITMENT

DES-OE-0102.10D (REV 12/2014)

ADA Notice

CONTRACT NO:						
BID AMOUNT:						
\$ BID OPENING DATE:						
DID OF ENTIRE BYTTE.						
BIDDER'S NAME:						
DBE GOAL FROM CONTR	ACT %:					
DBE PRIME CONTRACTOR CERTIFICATION 1: TOTAL NUMBER OF ALL SUBCONTRACTS (DBE & NO					TOTAL VALUE OF ALL SUBCONTRA	CTS (DBE & NON-DBE)
BID ITEM NO.	SERVICES TO BE SI	D DESCRIPTION OF JBCONTRACTED OR JBE PROVIDED ²	WORK CATEGORY CODES ³	opened.	NAME OF DBEs st be certified on the date bids are include Caltrans' certification no., DBE s, and phone number. Show 2nd and lower tier subcontractors)	AMOUNT (\$)
Show all DBE firms being each DBE shown stating shown for the specific ar	that it will be participati				Total Claimed Participation	\$
The names of the 1st tie			ce consistent with the			%
Subcontractor List (Pub Cont Code § 4100 et seq.). 1Each DBE prime contractor must enter its certification number and show all work to be performed by DBEs, including work performed by its own forces.					er acknowledges that it is comm own on this form to meet the cor	itted to use the
² If 100% of an item is no the item to be performed		nished by the DBE, des	scribe the exact portion of			
³ Use Work Category Codes from the California Unified Certification Program database.					gnature of Bidder	
					te (A	rea Code) Tel. No.
				Pe	rson to Contact (Ple	ease Type or Print)

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STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION

DBE CONFIRMATION

DES-OF-	.0102	13	(NEW)	05/2015)	

Contract no.:			
Name of DBE business:			
Name of DBE representative): :		
DBE certification number:			
Name of bidder:			
Name of prime contractor if	different from the bidder:		
Name of representative of bi	dder or prime contractor:		
Date:			
Bid item number	Item of work and description of services to be subcontra	cted or materials to be provided ¹	Amount (\$)
	be performed or furnished by the DBE, describe the exact	Total	
portion of the item to be per	rtormea or turnisnea.	enterprise, I confirm that my busin prime contractor shown above reg the bidder is awarded the contract contractual agreement with the bid the type and dollar amount of worl form.	dder or prime contractor to perform a shown on the DBE Commitment at the foregoing is true and correct. Trepresentative:
		Date:	

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STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORT	ATION	

DBE GOOD FAITH EFFORTS DOCUMENTATION

DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.:	

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1. List items of work the Bidder made available to DBE firms. Identify items of work the Bidder might otherwise perform with its own forces, items that have been broken down into economically feasible units to facilitate DBE participation, and items for which the Bidder has established flexible time frames for performance and delivery schedules in a manner that encourages and facilitates DBE participation. For each item listed, show the dollar value and percentage of the total contract. The Bidder must demonstrate that sufficient work to meet the goal was made available to DBE firms.

ltem of Work Offered, Services Offered, or Materials Supplied	Perfor	Normally ms Item s/No	Facilitate	en Down to Participation es/No	for Performan Sch	xible Timeframes ce and Delivery edules s/No	Amount (\$)	Percentage of Total Bid
	YES	NO	YES	NO	YES	□NO		
	YES	□ NO	YES	□ NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□NO		
	YES	NO	YES	NO	YES	□NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	□ NO	YES	□NO	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	Пио	YES	Пио	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	Пио	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		
	YES	NO	YES	NO	YES	□ NO		

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DBE GOOD FAITH EFFORTS DOCUMENTATION

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Bidder's Name	<u>:</u> :
Contract No.:	<u> </u>

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					nclude the items of work offered a n copies of solicitations. e-mail me		
Name of DBE Solicited		Date of In	itial Solicitation	ltems o	f Work Offered	Follow Up Me	thods and Dates
DBE, the DBEs that prov	vided quotes, the	e price quote for e	ach firm, and the pri		specific to the items of work being E if the selected firm is not a DBE ract.		
Items of Work	Specifications	ed Plans/ for Work Offered ss/No	Name of Selecte Firm	d DBE or Non-DBE	Name of Rejected Firm	Quote (\$)	Price Difference (\$)
	YES	□ио					
	YES	□ио					
	YES	Ои					
	YES	Ои					
	YES	Пио					
	YES	Пио					
	YES	Ои					
	YES	Ои					
	YES	□ NO					
If the firm selected for the Provide evidence as to v					nd attach names, addresses, and	phone numbers for the	firms listed above.

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DBE GOOD FAITH EFFORTS DOCUMENTATION DES-OE-0102.11A (REV 12/2014)

Bidder's Name:	
Contract No.:	
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4. Describe the Bidder's outreach efforts to identify and solicit the interest of all certified DBEs that have the capability to perform the work of the Contract. Provide copies of supporting documents.								
Description of Outreach	Dates	Location (if applicable)	Results					
	de interested DBEs with adequate information a assisted, the type of information provided, and							
Describe the Bidder's efforts made to assist dates. Provide copies of supporting document	t interested DBEs in obtaining bonding, lines of ts.	credit, or insurance. Identify the DBEs assisted	d, the type of assistance offered, and the					
equipment the DBE purchases or leases from documents. List efforts made to assist interest	t interested DBEs in obtaining necessary equip the prime contractor or its affiliate. Identify the ted DBEs in obtaining bonding, lines of credit, in abcontractor purchases or leases from the prime	DBEs assisted, the type of assistance offered, nsurance, necessary equipment, supplies, mat	and the dates. Provide copies of supporting erials, or related assistance or services,					
List the names of agencies and the dates o provide copies of supporting documents.	n which they were contacted to provide assistar	nce in contacting, recruiting, and using DBE fir	ms. If the agencies were contacted in writing,					
Include additional data to support a demons	stration of good faith efforts.							
NOTE: USE ADDITIONAL SHEETS OF PAPER IF NECESSARY.								

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